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7590

12/06/2006

BRISTOL-MYERS SQUIBB COMPANY
P.O. Box 4000
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Nickki L. Parlet

(Depositor's name)

Nickki L. Parlet
2121/2007

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/077,111	02/15/2002	C. Gordon Todderud	D0031 NP	1564

TITLE OF INVENTION: IDENTIFICATION AND CLONING OF A NOVEL HUMAN GENE, RET16, INVOLVED IN THE INTRACELLULAR SIGNALING CASCADE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/06/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
ZARA, JANE J	1635	435-069100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<u>Nickki L. Parlet</u>
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		<u>Stephen C. D'Amico</u> 3

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(A) NAME OF ASSIGNEE

Bristol-Myers Squibb Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Princeton, N.J.

Reel/012765 Frame/0790

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Publication Fee (No small entity discount permitted)
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Nickki L. Parlet

Date

2/21/2007

Typed or printed name

Nickki L. Parlet

Registration No.

44,996

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